10/528204 Rec'd PCT/PTO 0 9 JUN 2005

PTO/SB/01 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN	Attorney Docket Number First Named Inventor	PHUS020523 MI-SUEN LEE			
PATENT APPLICATION	COMPLETE IF KNOWN				
(37 CFR 1.63)	Application Number	I			
☐ Declaration ☐ Declaration Submitted OR Submitted after Initial	Filing Date				
With Initial Filing (surcharge Filing (37 CFR 1.16 (e))	Group Art Unit				
required)	Examiner Name				

As a below named inve	entor, I hereby declare tha	at:	•				
My residence, post office	e address, and citizenship a	are as stated below next t	o my name.				
	rst and sole inventor (if only on ect matter which is claimed and				ıral names		
METHOD AND A	PPARATUS FOR CO				NE		
IMAGE							
the specification of which	/Title of th	e Invention)					
	(Title Of th	e invention)					
is attached hereto OR							
	YYYY) [as United States Ap	nlication Number o	r DCT Internation	al		
ZZ Was nied on (MINEDE)		as United States Ap	plication Number of	i PC i internation	31		
Application Number	, and	was amended on (MM/DD/Y)	YYY)	(if applicable).		
I hereby state that I have revie specifically referred to above.	wed and understand the conte	nts of the above identified spe	ecification, including	g the claims as a	mended		
I acknowledge the duty to disc	lose information which is mater on which became available be	rial to patentability as defined	in 37 CFR 1.56, in	cluding for contin	uation-in-part		
international filing date of the o							
I hereby claim foreign priority to breeder's rights certificate(s),							
States of America, listed below breeder's rights certificate(s),	v and have also identified belo or of any PCT international ap	w, by checking the box any fo	oreign application(s) for patent, inver	ntor's or plant		
claimed.		E 1 . EU . B.4.	Duta dia	Certified Copy	. Attached?		
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	YES	NO		
				123			
Additional foreign applicat	Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual - case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (03-01)
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DECLARATION — Utility or Design Patent Application						
Direct all correspondence to: X Customer Number Bar Code Label	or *2	473	37* 	OF	₹ [Correspondence address below
	1811		111111111			
	PATENT 1	RADEMA	RK OFFICE			
Name PHILIPS ELECTRONICS NORTH AMERICA CORI	PORATION					
Address						
P.O. BOX 3001						
City	State				ZIP	
BRIARCLIFF MANOR	NEW YORK				1051	10
Country		Teleph	none			ax
USA		(914) 3	332-0222	!	(914) 332-0615
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.						
NAME OF SOLE OR FIRST INVENTOR:	☐ A petit	ion has	s been f	iled fo	r this	unsigned inventor
Given Name Mi-Suen (first and middle [if any])			nily Nam Surname		<u> </u>	
Inventor's X Le Vi L				Date	X	ot 16,200s
Ossining N	New York		USA			Hong Kong
Residence: City	State		Country			Citizenship
86 Briarcliff Drive South						
Mailing Address						
Ossining	New York		10562	!		USA
City	State		Zip			Country
NAME OF SECOND INVENTOR: A P	etition has b	een file	ed for th	is uns	igned	d inventor
Given Name Yun-Ting (first and middle [if any])			nily Nam Surname		N_	
Inventor's I'm-talp signature	· · · · · · · · · · · · · · · · · · ·	··· •	_	Date	U	/16/2003
	New York		USA			Taiwan
Residence: City Ossining	Residence: City Ossining State Country Citizenship					Citizenship
86 Briarcliff Drive South						
Mailing Address						
Ossining	New York					USA
City	State		Zip 1	0562		Country
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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 2 of 2

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor						
Given Name (first and middl	Fa	Family Name or Surname					
Miroslav		TRAJKOVIC					
Inventor's Signature				Date			
Residence: City Ossining	State New York	Counr y USA		Citizen Yugoslavia			
Mailing Address 38 ½ Walden F	Road, #C2-11						
Mailing Address							
City: Ossining	State NY	10562 ZIP	Country	USA			
Name of Additional Joint Inventor, if any:		☐ A petition has been filed	for this u	nsigned inventor			
Given Name (first and middl	e [if any])	Fa	Family Name or Sumame				
Vasanth		PHILOMIN					
Inventor's Signature				Date			
Residence: City Stolberg	State	Country Germany		Citizen ship India			
Mailing Address Auf Der Hoehe	9						
Mailing Address							
City Stolberg	State	Zip 52223	Country	Germany			
Name of Additional Joint Inventor, if any:		☐ A petition has been filed	d for this u	nsigned inventor			
Given Name (first and middl	e [if any])	Family Name or Sumame					
Inventor's Signature				Date			
Residence: City	State	State Country Citize					
Mailing Address							
Mailing Address							
City	State	Zip	Countr	У			

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DECLARATION FOR UTILITY OR DESIGN			Attorney Docket Number	PHUS020523 MI-SUEN LEE		
PATENT APPLICATION (37 CFR 1.63)		COMPLETE IF KNOWN				
		Application Number	1			
☐Declaration ☐Declaration Submitted OR Submitted after Initial		Filing Date				
With Initial Filing (surcha	Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit				
Filling		required)	Examiner Name			

As a below named inve	As a below named inventor, I hereby declare that:							
My residence, post office	e address, and citizenship a	are as stated below next t	o my name.					
	rst and sole inventor (if only on ect matter which is claimed and				al names			
are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: METHOD AND APPARATUS FOR CORRECTING A HEAD POSE IN A VIDEO PHONE IMAGE								
the specification of which	(Title of th	e Invention)						
is attached hereto								
OR								
	YYYY)	as United States Ap	plication Number or	PCT International	1			
Application Number	_ and	was amended on (MM/DD/Y)	M) [(if	applicable).			
I hereby state that I have review specifically referred to above.	wed and understand the conte	nts of the above identified spo	ecification, including	g the claims as am	iended			
applications, material informati	lose information which is mater on which became available be continuation-in-part application.	tween the filing date of the pr						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy	Attached?			
Number(s)	Country	(MM/DD/1111) Country	Not Claimed	YES	NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: x Customer Number or Bar Code Label *24737*					
Dai Cooc Labor				OR	Correspondence address below
	10.11	.111.11111111111111			
	PATENT	TRADEMA	ARK OFFICE		
Name					
PHILIPS ELECTRONICS NORTH AMERICA COR	PORATION				
Address P.O. BOX 3001					
City	State			ZII	
BRIARCLIFF MANOR	NEW YORK				510
Country	Name of the last	Telepi	hone		Fax
USA			332-0222		(914) 332-0615
I hereby declare that all statements made herein of my owr believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S. application or any patent issued thereon.	made with the l	knowledg	ge that wilfu	il false state	ements and the like so made are
NAME OF SOLE OR FIRST INVENTOR:	A petif	tion has	s been fil	led for th	is unsigned inventor
Given Name Mi-Suen Family Name LEE or Surname					
Inventor's Signature .				Date	
Ossining	New York		USA		Hong Kong
Residence: City	State		Country		Citizenship
86 Briarcliff Drive South					
Mailing Address					
Ossining	New York	New York 1056			USA
City	State		Zip		Country
NAME OF SECOND INVENTOR: A p	petition has b	een fik	ed for this	s unsign	ed inventor
Given Name Yun-Ting (first and middle [if any])			mily Name Surname	e LIN	
Inventor's Signature				Date	
	New York		USA		Taiwan
Residence: City Ossining	State		Country		Citizenship
86 Briarcliff Drive South					
Mailing Address			•		
Ossining	New York				USA
City	State		Zip 10	562	Country
Additional inventors are being named on the 1/1	cunnlemental A	dditional	Inventor(e)	cheet(c) D	TO/SB/03A attached barata

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:		☐ A petition has been filed for this unsigned inventor				
Given Name (first and midd	Family Name or Sumame					
Miroslax	·	TRAJKOVIC				
Inventor's Signature Wy John May 18	lu E			Date 10/30/01		
Residence: City Coram	New State York	Country USA		Citizen Yugoslavia		
Mailing Address 5105 Townhouse Drive						
Mailing Address						
City: Coram	State NY	11727 ZIP	Country	USA		
Name of Additional Joint Inventor, if any:		☐ A petition has been filed	d for this ur	nsigned inventor		
Given Name (first and midd	le [if any])	Fa	Family Name or Surname			
Vasanth		PHILOMIN				
Inventor's Signature				Date		
Residence: City Stolberg	State	_{Country} Germany		Citizen ship India		
Mailing Address Auf Der Hoehe	9					
Mailing Address						
City Stolberg	State	_{Zip} 52223	Country	Germany		
Name of Additional Joint Inventor, if any:		A petition has been filed for this unsigned inventor				
Given Name (first and midd	e [if any])	Family Name or Surname				
Inventor's Signature				Date		
Residence: City	State	Country	Citize nship			
Mailing Address						
Mailing Address	Mailing Address					
City	State	Zip	Country	/		

comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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DECLARATION FOR UTILITY OR DESIGN		Attorney Docket Number / PHUS020523 First Named Inventor MI-SUEN LEE					
PATENT APPLICATION			COMPLETE IF KNOWN				
(3	(37 CFR 1.63)		Application Number /				
☐Declaration Submitted	-		Filing Date				
With Initial Filing (surcharge		Group Art Unit					
•		required)	Examiner Name				

· · · · · · · · · · · · · · · · · · ·						
As a below named inve	entor, i hereby declare the	at:				
My residence, post office	e address, and citizenship a	are as stated below next to	o my name.			
	rst and sole inventor (if only on ect matter which is claimed and				rat names	
method and appearatus for correcting a Head Pose in a video Phone IMAGE						
the specification of which	(Title of th	ne Invention)				
☐ is attached hereto						
OR						
	/YYYY)	as United States App	plication Number o	r PCT Internationa	đ	
Application Number	and	was amended on (MM/DD/Y)	YY)	(if	f applicable).	
I hereby state that I have revie specifically referred to above.	ewed and understand the conte	nts of the above identified spe	ecification, including	g the claims as an	nended	
applications, material informati	close information which is mater ion which became available be continuation-in-part application.	tween the filing date of the pri				
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Prior Foreign Application Number(s)	Country	Foreign Filing Date ' (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy	Attached?	
Number(s)	Country	(WIW/DD/TTTT) Country	Not Claimed	YES	NO	
Additional fareign application numbers are listed on a supplemental priority data sheet PTO/SR/028 attached hereto:						

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box 1450, Alexandria, VA 22313-1450.

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: X Customer Number	ror *2	473	37*			
Dai Code Laber				OR	Correspondence address below	
	9111	1 11 1111 1111 11				
	PATENT	FRADEMA	RK OFFICE			
Name						
PHILIPS ELECTRONICS NORTH AMERICA COR	PORATION					
Address						
P.O. BOX 3001			-			
City BRIADCLIEF MANOR	State NEW YORK			ZI		
BRIARCLIFF MANOR	NEW TORK	Tolonk	<u> </u>	1 10	510	
Country		Teleph			Fax (944) 222 0645	
			332-0222		(914) 332-0615	
I hereby declare that all statements made herein of my own believed to be true; and further that these statements were punishable by fine or imprisonment, or both, under 18 U.S. application or any patent issued thereon.	made with the k	nowledg	e that wilfu	ul faise stat	ements and the like so made are	
NAME OF SOLE OR FIRST INVENTOR:	A petit	ion has	s been fi	led for th	nis unsigned inventor	
Given Name Mi-Suen Family Name LEE or Surname						
Inventor's Signature				Date		
Ossining	New York		USA		Hong Kong	
Residence: City	State		Country		Citizenship	
86 Briarcliff Drive South						
Mailing Address						
Ossining	New York		10562		USA	
City	State		Zip		Country	
NAME OF SECOND INVENTOR: A p	etition has b	een file	ed for thi	is unsigr	ned inventor	
Given Name Yun-Ting (first and middle [if any])	 .		nily Name Surname	e LIN		
Inventor's Signature		•		Date		
	New York		USA		Taiwan	
Residence: City Ossining	State		Country		Citizenship	
86 Briarcliff Drive South						
Mailing Address						
Ossining	New York				USA	
City	State		Zip 10	0562	Country	

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DECLARATION

, ADDITIONAL INVENTOR(S) . Supplemental Sheet Page 2 of 2

Name of Additional Joint Inventor, if any:	☐ A petition has been filed for this unsigned inventor					
Given Name (first and middle	Fa	Family Name or Surname				
Miroslav		TRAJKOVIC				
Inventor's Signature				Date		
Residence: City Ossining	State New York	Counr y USA		Citizen Yugoslavia		
Mailing Address 38 ½ Walden F	Road, #C2-11					
Mailing Address						
City: Ossining	State NY	10562 ZIP	Country	USA		
Name of Additional Joint Inventor, if any:		☐ A petition has been filed	l for this u	nsigned inventor		
Given Name (first and midd)	e [if any])	Fa Fa	mily Name	e or Surname		
Vas <u>anth.</u>		PHILOMIN				
Inventor's Signature	(1) /			Date (0-20-2003		
Residence: City Stolberg	State	_{Country} Germany		Citizen ship India		
Mailing Address Auf Der Hoehe	9	,				
Mailing Address						
City Stolberg	State	_{Zip} 52223	Country	Germany		
Name of Additional Joint Inventor, if any:		☐ A petition has been filed	l for this u	nsigned inventor		
Given Name (first and midd	e [if any])	Family Name or Surname				
Inventor's Signature				Date		
Residence: City	e: City State Country State					
Mailing Address						
Mailing Address						
City	State	Zip	Country	у.		

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Koninklijke Philips Electronics N.V. Application No./Patent No.: ____ Filed/Issue Date: Concurrently Entitled: METHOD AND APPARATUS FOR CORRECTING A HEAD POSE IN A VIDEO PHONE IMAGE Koninklijke Philips Electronics N.V. corporation (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. the assignee of the entire right, title, and interest; or 2. \square an assignee of less than the entire right, title and interest. The extent (by percentage) of its ownership interest is in the patent application/patent identified above by virtue of either: A. [r] An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel _____, Frame ____, or for which a copy thereof is attached. OR B. [] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown 1 From: To:-The document was recorded in the United States Patent and Trademark Office at _____, Frame ______, or for which a copy thereof is attached. To: The document was recorded in the United States Patent and Trademark Office at Reel _____, Frame _____, or for which a copy thereof is attached. To: The document was recorded in the United States Patent and Trademark Office at _____, Frame _____, or for which a copy thereof is attached. [] Additional documents in the chain of title are listed on a supplemental sheet. [] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee. 81 GREGORY L. THORNE, Reg. 39,398 Date Typed or printed name (914) 333-9665 Telephone number Signature (Sr. Intellectual Property Counsel Title

This collection of information is required by 37 CFR 3.73(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

10/528204 Rec'd PCT/PTO 09 JUN 2005

Approved for use through 11/30/2005. OMB 0551-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

(beach									
I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).									
I hereby	y appoint:								
Practitioners associated with the Customer Number:			24737						
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):									
	Name ,		Registration Number	The same of the sa			Registration		
li									Number
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	<i>(</i>)								
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents									
Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:									
X The address associated with Continue 1 24737									
OR	sociated with Customer Number:] 2	473	7					
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Address Address									
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City			State				Zip		
Country							Z-IP		
Telephone	e				Fax				
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Assignee Name and Address:									
KONINKLIJKE PHILIPS ELECTRONICS N.V.									
Groenewoudseweg 1									
5621 BA Eindhoven, The Netherlands									
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A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioners is sufficient.									
the practitioners appointed in this form if the appointed practitioners 37 CFR 3.73(b) may be completed by one of and must identify the application in which this power of Atomovie to be fled to act on behalf of the assignee,									
and must identify the application in which this Power of Attorney is to be filed.									
SIGNATURE of Assignee of Record									
The dividual whose standare and title is supplied below is authorized to act on behalf of the assignee									
Signature	[Mil		un			Date 1	4 Janua	ary	2005
Name	Michae]						e(914)		-9637
Title	Authori	zed Representat:	ive				(/ 47/	555	-5037

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

10/538204

JC17 Rec'd PC1/P10 09 JUN 2005

In re Application of

Atty. Docket

MI-SUEN LEE ET AL

US020523

-- Serial No.

Filed: CONCURRENTLY

Title: METHOD AND APPARATUS FOR CORRECTING A HEAD POSE IN A VIDEO

PHONE IMAGE

Commissioner for Patents Alexandria, VA 22313

APPOINTMENT OF ASSOCIATES

Sir:

The undersigned Attorney of Record hereby revokes all prior appointments (if any) of Associate Attorney(s) or Agent(s) in the above-captioned case and appoints:

GREGORY L. THORNE

c/o U.S. PHILIPS CORPORATION, Intellectual Property & Standards,

345 Scarborough Road, P.O. Box 3001, Briarcliff Manor, New York

10510, his Associate Attorney(s)/Agent(s) with all the usual powers

to prosecute the above-identified application and any division or

continuation thereof, to make alterations and amendments therein,

and to transact all business in the Patent and Trademark Office

connected therewith.

ALL CORRESPONDENCE CONCERNING THIS APPLICATION AND THE LETTERS PATENT WHEN GRANTED SHOULD BE ADDRESSED TO THE UNDERSIGNED ATTORNEY OF RECORD.

Michael E. Marion, Reg. 32,266

Attorney of Record

Dated at Briarcliff Manor, New York this 7th day of June, 2005.